

THE STATE BAR OF CALIFORNIA OFFICE OF CERTIFICATION

180 Howard Street · San Francisco, CA 94105-1639 (415) 538-2120 · legalspec@calbar.ca.gov

\$:REC'D BY:	
APPL#	
FOR OFFICIAL USE ONLY	

LEGAL SPECIALIST EDUCATION ACTIVITY APPLICATION

Include one copy of the application and all the attachments.

Include the \$75 non-refundable filing fee.

Contact Name.								
Provider Name:								
Provider Address:								
City:	State:	Zip:	+					
Web-site:					Phone:	()	-
E-mail:					Fax:	()	-
2) SPECIALTY AREA —								
☐ Appellate Law ☐ Ba	nkruptcy Law		Criminal Law		Estate Pla	anning	g Trust	and Probate
☐ Family Law ☐ Imi	migration and Nationali	ty Law 🔲 T	axation Law		Workers'	Com	pensati	on Law
3) ACTIVITY								
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
Activity Title:								
Date and Time of Activity:								
Number of Hours of Credit	Requested:	(Use the Acti	vity Content	Attach	nment to s	pecify	/ categ	ory(ies) of cr
Is this an application for re	enewal? Yes	N	0	lf 'Y	es', progr	am nu	ımber:	
Is this an application for re					es', progr	am nu	ımber:	
	val for audio/video tape the entire event is not t	s of this activi	ty? Yes [No [
Are you requesting approv	val for audio/video tape the entire event is not be segment lasts.	s of this activi peing taped, p dditional Shee	ty? Yes [No [ng whi	ich port	tions are beir
Are you requesting approv	val for audio/video tape the entire event is not to segment lasts. Stantive written material	s of this activi peing taped, p dditional Shee ls? Yes	ty? Yes [blease attachet Attached No	n a she	No eet detailin	ng whi	ich port	tions are beir
Are you requesting approved If you answered 'Yes' and taped and how long each some Does this activity have substitution.	val for audio/video tape the entire event is not to segment lasts. Stantive written material	s of this activi peing taped, p dditional Shee ls? Yes	ty? Yes [blease attachet Attached No	n a she	No eet detailin	ng whi	ich port	tions are beir

ATTESTATION ————————————————————————————————————	
Read, sign, and date below. Your signature MUS	ST be original.
I agree to comply with Section 7.0, Approval of Ed Program for Certifying Legal Specialists.	lucation Programs, of the Rules Governing the State Bar of California
	gal specialization educational credit shall meet the criteria for e Rules Governing the State Bar of California Program for Certifying
	vears from the date of each educational offering. Information regarding Specialization (BLS) upon request by the BLS or the attendee.
I declare under penalty of perjury under the laws of are true and correct.	of the State of California that the foregoing answers and statements
Name:	Signature
Title:	Date:
5) SUBMISSION CHECKLIST ————————————————————————————————————	
☐ Include the appropriate Activity Content at	tachment for your activity and any required enclosures.
☐ Enclose \$75 application fee. Make checks	payable to 'The State Bar of California.'
Attach one copy of the application and all i	its attachments to this original.
MAIL TO:	The State Bar of California Legal Specialization-Provider Approval 180 Howard Street San Francisco, CA 94105-1639

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LEGAL SPECIALIST EDUCATION ACTIVITY Immigration and Nationality Law Activity Content Attachment

1) ACTIVITY INFORMATION —	
Provider Name:	Date:
Title of Activity:	Time:
2) ACTIVITY CONTENT	
This section MUST be completed or the application WILL NOT be processed. Immigration a categories.	and Nationality Law educational content must fall into the following
(A) Immigrant visas	(D) Administrative and judicial review
(B) Non-immigrant visas	(E) Citizenship and naturalization
(C) Deportation/exclusion/employer sanctions/anti-discrimination	

SAMPLE

Date	Time	A1	A2	А3	A4	В	С	D	Е	F	1
12/01/07	9:00-4:00	1.0		2.5	2.0	.5		1.0			1
]
Total Hou	rs Requested										1

CERTIFICATE OF ATTENDANCE FOR CALIFORNIA LEGAL SPECIALIZATION EDUCATION IN IMMIGRATION AND NATIONALITY LAW

Provider			
Subject Matter/Title			
Date & Time of Activity			
Location			
Length of Activity			
California Legal Specialization cre	edit was offered in the following	ng areas:	
AREA		HOURS OFFERED BY PROVIDER	HOURS CLAIMED BY PARTICIPANT
Immigrant Visas, including immediate re categories, special immigrants, labor ce and waivers, adjustment of status, legali procedures			
Non-Immigrant Visas, including change categories of non-immigrant visas	of non-immigrant status and all		
Deportation/Exclusion/Removal Procedurocedures, deportation/exclusion groun immigration and administrative law court employer sanctions and anti-discriminati			
Administrative and Judicial Review, included of the Department of Justice, Department, and motions to reopen and for reinclude appeals to the Court of Appeals, other district court actions)			
Citizenship and Naturalization, including acquisition and loss of citizenship	naturalization, derivation, and		
TOTAL HOURS OFFERED/CLA	AIMED		
To be completed by the attorne	y after participation in the a	above-named activity	<i>/:</i>
By signing below, I certify that I pa California Legal Specialization cre			
Name:			
Signature:		Date:	

Reminder: If the provider has not been granted credit for a particular area, you cannot claim credit for that area. Keep this record of attendance for at least one year from the date the California Board of Legal Specialization acts on your application for certification or recertification. In the event that you are audited by the Board, you may be asked to submit this record of attendance.

RECORD OF ATTENDANCE FOR CALIFORNIA LEGAL SPECIALIZATION EDUCATION IN IMMIGRATION AND NATIONALITY LAW

Provider	
Subject Matter/Title	
Date & Time of Activity	
Location	
Length of Activity	

ELIGIBLE LEGAL SPECIALIZATION CREDIT:

AREA	HOURS
Immigrant Visas	
Non-Immigrant Visas	
Deportation/Exclusion/Removal Procedures	
Administrative and Judicial Review	
Citizenship and Naturalization	
TOTAL HOURS OFFERED	

Name of Attendee	California State Bar No.	Attendee Signature
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	Janon	(